



# The Journal

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April 28, 2016

## NSAB Celebrates Earth Week



PHOTO BY MCSN WILLIAM PHILLIPS



PHOTO BY AIRMAN MATTHEW HOBSON

**Sailors and civilians aboard Naval Support Activity Bethesda (NSAB) participate in multiple events recognizing Earth Week throughout the week of April 18-22.**

**By ANDREW DAMSTEDT**  
**NSAB Public Affairs staff writer**

Equipped with gloves and carrying white trash bags, a slew of volunteers picked up discarded bottles, gloves, cigarette butts and other litter around Naval Support Activity Bethesda (NSAB) April 20 as part of Earth Week.

"It's something that has to be done, this is our planet, this is our base, this is the place we work, it's like our home," said Hospital Corpsman 3rd Class Taylor Stamey, who was picking up trash with others outside Walter Reed National Military Medical Center's emergency room. "We need to pick up after ourselves and it helps the environment. I think it's a really great thing."

NSAB Commanding Officer Capt. Marvin L. Jones kicked off the trash pick-up by telling those assembled that it's important to be good stewards not only of NSAB, but also of the Earth.

"This is our environment and we should do everything we can to make it a healthy environment," Jones said.

Navy Lt. Neville Willoughby picked up trash near Building 27 with a few other Sailors.

"It's a great opportunity for us to come together to take care of our home," Willoughby said.

Hospital Corpsman 1st Class Elaine Walters came out with a group from the Navy Bureau of Medicine and Surgery office that collected trash from a wooded area behind Navy Gateway Inns and Suites.

"It's our way of giving back," said Walters, who planned to fill up her trash bag.

At last year's annual cleanup she said she actually filled a bag with pieces of a car from an accident that hadn't been cleared up all the way.

Susan Paul, NSAB environmental program director, said there were about 40 volunteers who

collected more than 100 pounds of trash.

"Any trash we keep out of the bay is good for us," Paul said.

Other events during Earth Week included a forum of NASA and Navy scientists speaking on what effects humans have on the Earth, an educational fair on Main Street and a tree planting at the USO Warrior and Family Center at Bethesda.

A flowering dogwood was planted April 21 with Jones and Cmdr. Jason Chung, NSAB public works officer, tossing the first shovelfuls of dirt.

"My daughter was born on Earth Day, and she's only six but she'll tell you it's not only my birthday but it's Earth Day," Chung said. "Every year it reminds me that yes, it's her birthday but we also have to think as we get older and give off the baton to our children to lead, we want to make sure that we're good stewards and leave this Earth in a good habitable fashion."



# DEOCS Survey: Communication is Key

First, I'd like to thank the 2,400 active duty, civil service, and civilian contractors who completed the online Defense Equal Opportunity Management Institute Organizational Climate Survey, or DEOCS. With nearly 34 percent hospital participation, we're assured of having a statistically valid survey that will guide us toward actionable results.

Through the open-ended questions, it comes through crystal clear that the large majority of you feel a strong sense of purpose working at "the President's Hospital" where we care for our nation's leaders and its heroes. You also expressed profound admiration and respect for our clinical staff, especially our doctors and nurses, calling them "the best of the best" in American medicine. And you recognize that we have more than our share of world class centers of excellence, such as the Murtha Cancer Center, the National Intrepid Center of Excellence, the Military Advanced Training Center, the National Military Audiology and Speech Pathology Center, and many more.

While I am pleased to see that most of you feel that Walter Reed National Military Medical Center (WRNMMC) is free from all kinds of workplace discrimination and harassment – there is still work to be done in this and other areas of concern.

Although it will take some time to review the 4,000-page report, what jumps as our "big ticket" issues for 2016 are no surprise -- rush-hour traffic, lack of on-site parking, and a slow and unreliable computer network. In addition, many of you reported



Rear Adm. David Lane  
WRNMMC Director

feel mentally, physically and emotionally exhausted -- which I suspect drags down our morale and contributes to noticeably low turnouts at various command functions (medical staff meetings, town halls, ceremonies, etc.) – this really got my attention.

Many of you are asking – "What Next?"

While there isn't much that we, as WRNMMC, can do about regional rush-hour traffic, we are redoubling our efforts to improve the parking situation. Mindful of the Montgomery County ordinances specifying one parking space for every three full-time employees, we are looking for ways to lessen the impact on staff and patients – especially as our construction improvement projects will continue to have an adverse impact on the parking.

We will also be working more with the Defense Health Agency, the Defense Information Service Agency, and the Space and Naval

Warfare Systems Command – those who manage our IT infrastructure and systems – in an effort to improve the speed, reliability and security of our systems and data.

All of these actions are preliminary responses to the input you provided through the DEOCS survey.

Our Command Assessment Team (CAT), in concert with our Board of Directors, is currently conducting in-depth analytics of the survey to obtain a better understanding on the array of issues, concerns and best practices you identified. To help this process, I encourage you to get involved by participating in relevant focus groups when they convene in the coming weeks.

Following the focus groups, the CAT will again brief our Board of Directors on their findings, and together they will develop and implement a set of comprehensive corrective strategies for improving, enhancing and sustaining all of the good things we're doing, while remedying identified problem areas.

Our goal remains constant -- to improve our policies and practices -- and in doing so we'll work to make Walter Reed National Military Medical Center a better place for our patients, our staff and everyone who passes through our doors.

Again, my sincere "Thanks" for participating in the command climate survey, and more importantly for what each of you does every day to make Walter Reed National Military Medical Center the Flagship of the Military Health System.

## Bethesda Notebook

### Sexual Assault Awareness

In observance of Sexual Assault Awareness and Prevention Month, there will be an Empowerment Relay Saturday from 8 to 11:30 a.m. For more information about the event, contact Kim Agnew, Monique Greene or Rosemary Galvan at 301-442-2053.

### Prostate Cancer Program

Dr. Philip Arlen, a medical oncologist with the National Cancer Institute, will present the program "Prostate Cancer: An Overview and Update of Novel Treatment Modalities," to patients with prostate cancer and their families May 5 from 7 to 8:30 p.m. in Walter Reed National Military Medical Center's America Building, 2nd floor, Room 2525. The program will be telecast to Fort Belvoir Community Hospital's Oaks Pavilion, 1st floor, Room 332. Military ID is required for base access to WRNMMC. For those without a military ID, call the Prostate Center at 301-319-2900 at least four business days prior to the event for base access. For more information, contact retired Col. Jane Hudak at 301-319-2918 or at [jane.l.hudak.ctr@mail.mil](mailto:jane.l.hudak.ctr@mail.mil).

### Armed Forces Olympics

Armed Forces Olympics will be held May 20 from 7 a.m. to 11 a.m. Start forming your team of 8-12 people for a chance to earn bragging rights. It will be a fun filled morning of obstacle courses, mind puzzles, inflatables, tug-o-war and endurance relays. There will be awards for first, second and third place. Not sure if you can take the morning off? May 20th is Organizational Day. Ask your chain of command for more information and approval then visit <https://nsabolympics2016.eventbrite.com> to register for this free event. For more information, call the Community Activities Coordinator at 301-295-1279.

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## Naval Support Activity (NSA) Bethesda

Commanding Officer: Capt. Marvin L. Jones  
Public Affairs Officer: Ronald D. Inman  
Public Affairs Office: 301-295-1803

**Journal Staff**  
Supervising Editor: Shejal Pulivarti  
Managing Editor: MCSN William Phillips  
WRNMMC Editor: Bernard Little

Staff Writers: MC1 Christopher Krucke, Andrew Damstedt, Sharon Renee Taylor, Joseph Nieves, Jamie Petroskey

Photojournalist: Airman Matthew Hobson  
NSA Bethesda  
Fleet And Family Support Center: 301-319-4087  
Walter Reed National Military Medical Center  
Office of Media Relations: 301-295-5727

NSAB Emergency Information Line: 301-295-6246

NSAB Ombudsman

Michelle Herrera: 240-370-5421

NSAB Chaplain's Office: 301-319-4443/4706

Installation SARC

Kimberley Agnew: 301-400-2411

Monique Green: 301-400-3366

Troop Command SARC

Rosemary Galvan: 301-319-3844

SARC 24/7: 301-442-2053

SAPR VA 24/7 Helpline: 301-442-8225



# Occupational Therapy: Transforming Lives, Building Independence

By **BERNARD S. LITTLE**

**WRNMMC Public Affairs staff writer**

Occupational therapists (OT) and OT assistants celebrate their profession during April, which the American Occupational Therapy Association (AOTA) has designated as Occupational Therapy Month.

The observance began in 1980 to draw attention to OT, “a client-centered health profession concerned with promoting health and well-being through life occupations,” explained Willie Haynes, an occupational therapist in the Outpatient Traumatic Brain Injury (TBI) Section at Walter Reed National Military Medical Center (WRNMMC).

“The primary goal of occupational therapy is to enable patients, such as service members and their dependents, to participate in their activities of everyday life (ADLs),” Haynes added.

“Occupational therapy is a broad health-care profession that works with all ages,” said Fatoumata Touray, a certified OT assistant in WRNMMC’s Outpatient TBI Section. “OT focuses significantly on restoring self-care skills which include but are not limited to, the ability to perform functional tasks such as upper and lower body dressing, bathing, and toileting. These functions may have been affected by neurological illnesses or physical dysfunction. Ultimately, the goal of OT is to increase autonomy and decrease caregiver [aid],” Touray continued.

“We have 25 OTs and eight OT assistants working at WRNMMC providing many occupational therapy services. We have three OTs and one OT assistant working for the Warrior Transition Brigade who provide vocational rehabilitation and reintegration,” said Army Col. Matthew St Laurent, a licensed occupational therapist and chief of the OT department at WRNMMC.



PHOTO BY BERNARD S. LITTLE

**Occupational therapist Max Hammer helps Amanda L. Crow use various techniques to help her participate in activities of everyday life.**

St Laurent said OT staff at WRNMMC provides services in assistive technology; amputee care; driving evaluations and rehabilitation; pediatric OT; inpatient (polytrauma and general medicine); outpatient orthopedics and hand clinic; TBI and neurology rehabilitation; recreational art activities;

sexual health and intimacy; adaptive sports; firearms training and Soldiering tasks; advanced field and stream (hunting and fishing); therapeutic

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## NSAB Employees Reflect on Public Service

By **MCSN WILLIAM PHILLIPS**

**NSAB Public Affairs staff writer**

Throughout the U.S., mayors, governors, agency leaders, communities and public service organizations participate in Public Service Recognition Week (PSRW) by issuing proclamations; hosting award ceremonies and special tribute events; and delivering messages about the value of public service.

May 2-6, Naval Support Activity Bethesda (NSAB) is offering a free spin class May 5 at 5:15 p.m. at the Fitness Center and two games of bowling and shoe rental for five dollars at the NSAB Bowling Center to show appreciation for public servants’ hard work throughout the year.

NSAB Executive Director Bill Meekins said, “The professionalism and dedication of our employees are the true spirit of NSAB and that is invaluable. As we celebrate Public Service Recognition Week, it’s important to recognize the contributions of our public servants and the work they do.”

Everyone has their own reason as



to why they applied for a government position.

“I have always wanted to work for the government and the military was always kind of special and near to me because I grew up in Annapolis,” said Ryan Emery, NSAB’s installation transportation officer. “I had been trying to apply for government jobs for quite a while. I got a contracting position here first to try to get my foot in the door. I just enjoyed the work and my boss pushed to convert it to a civil servant position.”

Some people in the private sector do not

look forward to going to work on Mondays because they do not like their job.

“One of the things that I always felt in the private sector, was that on Sunday night there was always that dread of going to work on Monday and knowing there was a week of stress ahead of me,” said Emery. “While there are definitely pressures, stress, and deadlines in my position, the work environment is much better. There is much more of a sense of camaraderie and teamwork in my command.”

In a study conducted by the Cato

Institute, federal workers’ pay and benefits were found to be 78 percent higher than private sector employees.

“The benefits are pretty similar to what I had in the military, except now I pay for my medical insurance,” said Dana Hiatt, an administrative support assistant for NSAB. “It’s a price I am willing to pay. I have a lot of friends that have jobs who don’t receive the benefits that I do.”

Some government employees like Hiatt have the opportunity to work alongside their spouses, increasing the time they get to spend together.

“My husband and I work the same hours so we carpool,” said Hiatt. “That was one of the main reasons I wanted this job. It allowed our schedules to sync up so we get to spend more time together.”

Unlike the private sector where companies can go out of business, the U.S. federal government never goes out of business.

“The stability this job offers is the key,” said Emery. “I’m [not worried] at the end of the week that I am going to be relieved of my duties. That helps me actually to work harder, so I can return the investment.”



# Earth Week in Photos

PHOTOS BY MCSN WILLIAM PHILLIPS AND AIRMAN MATTHEW HOBSON





# First Part of NICU Relocation Begins May 1

By **SHARON RENEE TAYLOR**  
WRNMMC Public  
Affairs staff writer

Walter Reed National Military Medical Center's (WRNMMC) neonatal intensive care unit (NICU) is scheduled to relocate in a series of moves, with the first move beginning May 1.

A window renovation project for Bldg. 10, slated to last approximately nine months, will displace the only level-3 unit in the Military Health System (MHS) and National Capital Region (NCR) that holds the nation's youngest, smallest and most critical pediatric warriors, explained Navy Cmdr. Patrick Shuster, NICU relocation coordinator.

During this time, the permanent NICU space will receive updates. The unit will temporarily relocate from 6-West to 6-East on June 1. In preparation for the NICU move, two other units will reposition to other areas of the medical center.

"It's really just a shifting, necessitated by the NICU," explained Army Lt. Col. Don Dendy, the registered nurse who serves as project manager for the department of nursing services (DNS) window project. "The infants can't be in

there while they're doing that work, so they have to move."

Sunday, May 1, the first portion of 4-East will move to 5-Center. Plans include the second portion of 4-East to relocate to 5-East on May 8, and the Mother Infant Care Center (MICC), also known as the Post-Partum Care Unit, will move down to occupy the 4-East space May 15.

The MICC and NICU staff will move to the temporary area June 1.

"It will be the same staff, providing the same care they've always done, just moved to a different location in the hospital," Dendy stressed.

Unit 4-East provides care to medical-surgery patients. For the duration of the NICU move, those patients will be admitted to one of the six other medical-surgical floors throughout the facility. There may be a need to utilize double occupancy in the patient rooms on some of the units to accommodate the displacement of the patients, according to Shuster.

"We will still maintain the same high level of care that we've always provided," Dendy stressed. "This is just a temporary situation. We're trying to maintain capacity where we can

try to get as many of our enrollees in as needed to come in and maintain the same kind of healthcare that we always have."

All stakeholders involved in the move conduct a weekly meeting to ensure coordination, to include input from the lab, pharmacy, radiology and nutrition services, according to Dendy.

"All the various areas are coordinating the moves and making sure everyone is on board and working together to make it happen in a timely fashion with no interruption to service. It goes without saying that it is a challenge, but it's been a tremendous team effort," Dendy said. "It's amazing to see all of the great teamwork."

The updates and modifications to the NICU are for the betterment of the facility, and enable WRNMMC to continue to provide the best in patient care as well as the best facilities for the medical center's patients, he explained.

"We have to do some modifications to the current area on the 6th Floor in Bldg. 10, on the east side to make it NICU-ready, and so that area has to be freed up to make the transition a little easier," Shuster explained.

According to Shuster, the challenge

is the coordination of the different moves that are happening, the different subcomponents of it and making it flow within the acceptable time frame.

The move is nothing new, he explained. The most recent move occurred when the former National Naval Medical Center integrated with Walter Reed Army Medical Center in 2011.

"It's not unprecedented but it's been a while since something like this has happened," Shuster said.

"One of the things that we're looking to do is get the word out of what we're doing, and let patients and families know that all the standards are not only being met, they're [already] being exceeded [compared to] the current standards," he explained.

Shuster said he expects the transition, from the NICU standpoint, to be nearly seamless. There are changes that will happen based on different environments the NICU patients will be going to—from a pod concept to single rooms, or having two infants in a room.

"It's the same concept that will be used when the new NICU is built in the near future," Shuster said.

## Pediatricians Focus On Healthy Kids, A Healthy Force

By **BERNARD S. LITTLE**  
WRNMMC Public Affairs staff writer

"We ask a lot of our children when we serve, so it's important to remember the unique situation that they are in and to find ways to support them," says Army Lt. Col. (Dr.) David Eigner, a pediatrician and the medical director of the Exceptional Family Member Program at Walter Reed National Military Medical Center (WRNMMC) in explaining the importance of observing Month of the Military Child and Military Children's Health Month, both celebrated during April.

The future health and well-being of children can be shaped now.

"We owe our military members the reassurance that we are looking out for their children's health whether [they are in the] Continental United States, outside the Continental United States, parent deployed or not," adds Dr. Cassie Carr, another WRNMMC pediatrician and a retired Navy lieutenant commander. "Many of our children will grow up to be part of the next generation of active duty military members, and it is in all of our best interest to ensure this population is as fit and healthy as can be."

Eigner encourages parents and adults to "lead by example" and live healthy lives. "When you come home, leave work at work and give your children your full attention. Try to make exercise and healthy eating a family way of life," he states.

"It's important to observe Military Children's Health Month because children of service members face some unique challenges, such as frequent parental deployments, frequent moves on a regular basis and just overall uncertainty about the future, all of which can greatly impact their health," adds Navy Lt. (Dr.) Jennifer Thompson, a WRNMMC pediatrician.

"Military children are still children and need the same

preventative wellness visits [as other children]," says WRNMMC pediatrician Army Maj. (Dr.) Witza Seide. "They may get the same colds and common childhood illnesses [as non-military children], but they are also at risk for other issues such as stress-related illnesses. Although adults may assume some children are too young to know what is going on, [children] just may deal with stress differently. The constant moves causing them to leave their homes and friends may manifest as bedwetting in a child who was recently potty-trained. The military trainings and deployments may present as behavioral issues such as separation anxiety.

"I feel that having this month will hopefully get providers to become more aware of their patient population and ask those questions so that they will be better equipped to deal with these patients," Seide adds.

Army Maj. (Dr.) Autumn Richards, chief, pediatric primary care service at WRNMMC, explains just as other children and adolescents, many military youngsters are facing challenges with being overweight and obese. "[Being] overweight and obesity are increasing at alarming rates in children. Children who struggle with [being] overweight and obesity often continue to be overweight or obese into their adult years, which poses long-term negative health consequences such as heart disease and stroke."

To combat being overweight and obesity, families can follow some very simple guidelines, Richards adds. "Eat five or more servings of fruit and veggies daily; reduce screen time to less than two hours daily; be physically active for more than one hour daily; and eliminate sugary beverages such as soda and juice. Parents should also know that they set the example for their children – their kids will eat and exercise as they do. Healthy eating and exercise is a family effort," she says."

Carr agrees, adding that scheduling routine wellness visits, maintaining up-to-date immunizations and being in communication with your child's medical provider regarding any concerns you have, are also important.

"Immunizations are the number one public health achievement of the last 100 years and the number one thing parents can do to protect their children from serious disease," Carr says. "No other medical intervention is as safe and effective [as immunizations]."

Immunizations play a vital role in the well-being of children, Carr explained further.

"Immunizations are particularly important to children because children are more commonly in situations where they will have exposure to infectious disease; children do not always have the best personal hygiene, and young children's immune systems are relatively naïve, so they do not always fight infection as efficiently as older children and adults do," Carr explains.

"As pediatricians, we are the champions of the health and wellness of children, and through vaccination, we are able to protect both our patients and the community we live in," says WRNMMC pediatrician Navy Lt. (Dr.) Krystin Engelhardt.

Carr adds that children should also get nine or more hours of sleep every night. "Children who are sleep-deprived are more prone to infectious illnesses as well. Our brains need sleep to organize and reset our daily biological cycles. Without adequate sleep, hormones become dysregulated and the immune system does not function as efficiently," she said.

Pediatricians focus on wellness and prevention for their young patients, Engelhardt explained.

Engelhardt said, "We as pediatricians focus much of our day making sure that our patients are growing well, meeting developmental milestones and staying healthy."

# THERAPY

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service dog training program; as well as inpatient and outpatient psychology.

“Occupational therapists use a wide range of treatment strategies, which are functional activities including: community outings, meal preparation sessions, work simulation tasks, and use of functional and purposeful technology for memory, cognition and initiation deficits,” said Army Maj. Colleen Daniels, assistant chief of WRNMMC’s OT department.

Daniels explained OTs may use treatment strategies such as activities of daily living and instrumental activities of daily living while working with patients who have neuromuscular deficits in order to retrain skills such as problem solving, sequencing and initiation of an activity. “Additionally, OTs may utilize innovative strategies such as a variety of dynamic and electrical stimulation orthoses, virtual reality and robotics to facilitate neuromuscular re-education while in a purposeful setting, or they may use animal assisted therapy/dog training to retrain coping skills and community reintegration for patients with traumatic brain injuries,” she continued.

Dorothy Porcello, a licensed OT in the Outpatient TBI Section, added, “I work in the brain injury and neurology section and treat cognitive and vision deficits for a variety of different diagnoses such as stroke, concussion and TBI. For cognitive issues, I

often teach strategies that help my patients to organize information and tasks after their injury. Examples of this might involve using a calendar or smartphone to track medical appointments, manage their medications, or organize social and family engagements. I encourage my patients to set goals for their activities that are most meaningful to them, because motivation affects memory in a positive way and helps patients to fully engage in the rehabilitation process. We work on everything from study skills for school to strategies that help them stay on top of demands at work and at home.

“There are many different reasons a patient would be referred to me for vision therapy,” Porcello continued. “I see pediatric dependents and active duty service members with eye coordination issues, and also patients whose vision has been affected by injury or trauma. There are lots of exercises to help the eyes work more efficiently, and we use everything from simple pen and paper tasks to more complex equipment that can be found in the optometry department to help patients develop the visual skills they need for daily life,” she said.

Samora Casimir, a licensed OT in the Inpatient/Acute Care Section at WRNMMC, added people often get OT confused with physical therapy. “During my evaluations and treatment [of patients], I explain what OT is and why I am asking them to do what it is I am asking of them,” Casimir stated.

Occupational therapy focuses more on evaluating and improving a person’s functional abilities. The OT does not directly treat a person’s injury. OTs

more commonly help people optimize their independence and their ability to accomplish their daily activities following an injury or in situations of physical impairment. Simply put, a PT or PT assistant treats the patient’s actual impairment, while an OT or OT assistant treats that impairment in action.

In addition to working in fixed medical treatment facilities, OTs are assigned to Combat Operational Stress Control (COSC) units, St Laurent added. “In fact, this is our primary deployment role,” he said. “There are about nine COSCs throughout the Army in the U.S. and Germany. We have occupational therapists who work in Army Warrior Transition Units. Occupational therapists have also deployed as part of TBI rehab missions to Afghanistan the last several years.”

In fiscal year 2015, the WRNMMC Occupational Therapy Services completed more than 33,300 rehabilitation encounters, according to St Laurent. “Not all of these are different patients because with the nature of rehab, we have ongoing follow-ups with patients who need several rehab treatments, but this number is quite remarkable if you consider the number of treatments offered to our beneficiary population in need of our services,” he added.

“[OT] Beneficiaries at WRNMMC include wounded warriors, active duty military, retirees and their family members with a range of illness and injury,” Daniels said. “In addition, unconventional beneficiaries may include patients in special categories, such as the Boston Marathon bombing victims, and VIPs, to include senators and military interest personnel.”

OT professionals play a vital role in the patient’s quality of life.

“The most meaningful thing I do in OT is to help someone get back to their proper selves after a traumatic injury,” said Hospital Corpsman 2nd Class Hector Riojas, a certified OT assistant who works in the Outpatient Orthopedics Section. “Patients come in hurt, and they say they want to get better. I get to be creative and help them find ways to do that,” he added.

Army Capt. Michelle Nordstrom, chief of the Outpatient Orthopedics Section, Outpatient Behavioral Health, and Dog Training program at WRNMMC, agreed. “My job as an occupational therapist plays a significant role in the behavioral health community by addressing the functional needs of my patients, which in turn allow the patients to open up more and truly address their [emotional] needs. Seeing them overcome challenging times in their lives by using the techniques that I have taught them, is the most rewarding part of my job as an OT.”

OTs are able to positively impact their patients through the skills and tools they provide.

Nordstrom shared a letter from an OT patient who stated, “I have been in the OT program for about one year. When I started, I was unable to perform the most basic life skills....I often could not tell what day it was due to insomnia and PTSD symptoms....As I progressed through the care I received, I rediscovered many of the skills I thought I lost, and I learned more than I initially had.... Words cannot completely express the profound impact that OT has had on me and my family as we learn how to recover and live again as a team.”

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